

<b>ORDER FOR SUPPLIES OR SERVICES</b>										PAGE 1 OF 3	
<b>1. CONTRACT PURCH ORDER/AGREEMENT NO.</b> W56HZV-05-D-0092			<b>2. DELIVERY ORDER/CALL NO.</b> 0005		<b>3. DATE OF ORDER/CALL (YYYYMMDD)</b> 2007JUL13		<b>4. REQUISITION/PURCH REQUEST NO.</b> SEE SCHEDULE		<b>5. PRIORITY</b> DOA4		
<b>6. ISSUED BY</b> U.S. ARMY TACOM LCMC AMSTA-AQ-ATAF KEVIN SONNENFELD (586)574-8900 WARREN, MICHIGAN 48397-5000 HTTP://CONTRACTING.TACOM.ARMY.MIL WEAPON SYSTEM: WPN SYS: NT EMAIL: KEVIN.SONNENFELD@US.ARMY.MIL			<b>CODE</b> W56HZV		<b>7. ADMINISTERED BY (If other than 6)</b> DCMA PITTSBURGH VA HIGHLAND DRIVE FACILITY BLDG 6 7180 HIGHLAND DRIVE PITTSBURGH PA 15206-1297			<b>CODE</b> S3911A		<b>8. DELIVERY FOB</b>  <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)	
<b>9. CONTRACTOR</b>  WHEELER BROS., INC. 384 DRUM AVENUE SOMERSET, PA 15501-3400  <b>NAME AND ADDRESS</b>  TYPE BUSINESS: Other Small Business Performing in U.S.			<b>CODE</b> 55683		<b>FACILITY</b>		<b>10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD)</b>  SEE SCHEDULE			<b>11. X IF BUSINESS IS</b> <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input checked="" type="checkbox"/> WOMAN-OWNED	
<b>12. DISCOUNT TERMS</b>			<b>13. MAIL INVOICES TO THE ADDRESS IN BLOCK</b> See Block 15			<b>14. SHIP TO</b> SEE SCHEDULE			<b>15. PAYMENT WILL BE MADE BY</b> DFAS - COLUMBUS CENTER DFAS-CO/NORTH ENTITLEMENT OPERATION P.O. BOX 182266 COLUMBUS OH 43218-2266		
<b>16. TYPE OF ORDER</b>			<b>DELIVERY/ CALL</b> <input checked="" type="checkbox"/>		THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.						
<b>PURCHASE</b>			<input type="checkbox"/> Oral <input type="checkbox"/> Written		Quotation _____, Dated _____.						
					furnish the following on terms specified herein.						
					ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.						
<div style="display: flex; justify-content: space-between;"> <span>NAME OF CONTRACTOR</span> <span>SIGNATURE</span> <span>TYPED NAME AND TITLE</span> <span>DATE SIGNED (YYYYMMDD)</span> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:         </div>											
<b>17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE</b>  SEE SCHEDULE											
<b>18. ITEM NO.</b>		<b>19. SCHEDULE OF SUPPLIES/SERVICE</b>				<b>20. QUANTITY ORDERED/ ACCEPTED*</b>		<b>21. UNIT</b>	<b>22. UNIT PRICE</b>		<b>23. AMOUNT</b>
		SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price  KIND OF CONTRACT: Supply Contracts and Priced Orders									
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					<b>24. UNITED STATES OF AMERICA</b> RENEE COLLICA RENEE.COLLICA@US.ARMY.MIL (586)574-5268 BY: _____ CONTRACTING/ORDERING OFFICER					<b>25. TOTAL</b> \$180,516.60	
<b>27a. QUANTITY IN COLUMN 20 HAS BEEN</b> <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED											
<b>b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>						<b>c. DATE (YYYYMMDD)</b>		<b>d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>			
<b>e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>						<b>28. SHIP. NO.</b>		<b>29. D.O. VOUCHER NO.</b>		<b>30. INITIALS</b>	
<b>f. TELEPHONE NUMBER</b>						<b>g. E-MAIL ADDRESS</b>					
<b>36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.</b>						<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		<b>32. PAID BY</b>		<b>33. AMOUNT VERIFIED CORRECT FOR</b>	
<b>a. DATE (YYYYMMDD)</b>						<b>b. SIGNATURE AND TITLE OF CERTIFYING OFFICER</b>					
						<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL				<b>34. CHECK NUMBER</b>	
										<b>35. BILL OF LADING NO.</b>	
<b>37. RECEIVED AT</b>		<b>38. RECEIVED BY (Print)</b>		<b>39. DATE RECEIVED (YYYYMMDD)</b>		<b>40. TOTAL CONTAINERS</b>		<b>41. S/R ACCOUNT NUMBER</b>		<b>42. S/R VOUCHER NO.</b>	

<p align="center"><b>CONTINUATION SHEET</b></p>	<p align="center"><b>Reference No. of Document Being Continued</b>  <b>PIIN/SIIN W56HZV-05-D-0092/0005 MOD/AMD</b></p>	<p align="right"><b>Page</b>    2 of 3</p>
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**Name of Offeror or Contractor:** WHEELER BROS., INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0013	SUPPLIES OR SERVICES AND PRICES/COSTS  NSN: 2520-01-112-2156 FSCM: 19207 PART NR: 11669426-1 SECURITY CLASS: Unclassified				
0013AA	<u>THIRD ORDERING YEAR</u>  NOUN: PROPELLER SHAFT WIT PRON: EH74S695EH      PRON AMD: 01      ACRN: AA AMS CD: 070011  <u>Description/Specs./Work Statement</u> TOP DRAWING NR: TDP 11669426-1 DATE: 01-JUL-2004  <u>Packaging and Marking</u> PACKAGING/PACKING/SPECIFICATIONS: SEE PACKAGING CLAUSES LEVEL PRESERVATION: Military LEVEL PACKING: B  <u>Inspection and Acceptance</u> INSPECTION: Origin      ACCEPTANCE: Origin  <u>Deliveries or Performance</u> DOC                          SUPPL <u>REL CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG CD</u> <u>MARK FOR</u> <u>TP CD</u> 001   W56HZV7187T840   SW3227     J                          2 <u>DEL REL CD</u> <u>QUANTITY</u> <u>DAYS AFTER AWARD</u> 001                          39                          180  002                          100                          210  003                          100                          240  004                          58                          0270  FOB POINT: Origin  SHIP TO: (SW3227)   DEF DIST DEPOT RED RIVER RECEIVING BLDG 499 10TH STREET AND K AVENUE TEXARKANA                          TX 75507-5000  <u>CONTRACT/DELIVERY ORDER NUMBER</u> W56HZV-05-D-0092/0005	297	EA	\$ _____ 607.80000	\$ _____ 180,516.60

Name of Offeror or Contractor: WHEELER BROS., INC.

CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/	OBLG		JOB				ORDER	ACCOUNTING		OBLIGATED
ITEM	MIPR	ACRN	STAT	ACCOUNTING CLASSIFICATION				NUMBER	STATION	AMOUNT	
0013AA	EH74S695EH	AA	2	97	X4930AC6D	6D	26FB	S20113	W56HZV	\$	180,516.60
	070011										
									TOTAL	\$	180,516.60
SERVICE									ACCOUNTING	OBLIGATED	
NAME	TOTAL BY ACRN		ACCOUNTING CLASSIFICATION				STATION		AMOUNT		
Army	AA		97	X4930AC6D	6D	26FB	S20113	W56HZV	\$	180,516.60	
									TOTAL	\$	180,516.60
ACRN	EDI ACCOUNTING CLASSIFICATION										
AA	97	0X0X4930AC6D	S20113	76D00000700110000026FB	S20113						